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**BARROW-UPON-SOAR
RURAL DISTRICT COUNCIL**

ANNUAL REPORT

**OF THE
MEDICAL OFFICER OF HEALTH
FOR THE YEAR 1952**



**J. W. HALL, M.D., B.S., B.Hy., D.P.H.
MEDICAL OFFICER OF HEALTH**

BARROW-UPON-SOAR RURAL DISTRICT COUNCIL

REPORT

**ON THE HEALTH AND SANITARY CONDITION OF THE
BARROW-UPON-SOAR RURAL DISTRICT**

Year ended 31st December, 1952

To the Chairman and Members of the Barrow-upon-Soar
Rural District Council.

PUBLIC HEALTH STAFF

MEDICAL OFFICER OF HEALTH

J. W. Hall, M.D., B.S., B.Hy., D.P.H.

SENIOR SANITARY INSPECTOR

W. Donovan, A.R.San.I., M.S.I.A., Certificate for Inspection of Meat
and Other Foods

DISTRICT SANITARY INSPECTORS

A. J. Blaylock, A.R.San.I., M.S.I.A.

L. R. Knowles, A.R.San.I., M.S.I.A.

CLERICAL

Miss M. Thompson

HOUSING WELFARE OFFICER

Mrs. E. L. Hunt

REPORT

Madam Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report for the year 1952, of the general conditions, health and vital statistics of the Barrow-upon-Soar Rural District.

The Report is in conformity with suggestions made by the Ministry of Health and also incorporates a section compiled by the Senior Sanitary Inspector.

The value and implications of an Annual Report dealing with medical matters can only be truly assessed by comparing it with Reports of previous years. Many infectious diseases have a periodicity of their incidence—and perhaps, too, of their severity—and this factor must be considered when making deductions from an Annual Report. In this present year the incidence of measles has been low whereas in 1951 there was an epidemic of the disease.

It would be fallacious, however, to claim that there has been an improvement in the control of measles of the area when the significant factor is that measles has a two-year periodicity and so accounting for the variation.

In review, it can be claimed that during recent years the control of the infectious diseases has shown great progress. This can partly be attributed to a decrease in virulence of the organisms and viruses but no doubt the improvements in living conditions and in preventive measures, such as immunisation, have been of major importance. It may be justifiable to claim that the apparent lack of control of some infectious diseases is not failure but only success postponed.

Concern is to be expressed about the decreasing numbers in the population who are protected against smallpox by vaccination. With the advance in air communications the great safety afforded to the community by the protective twelve-day period of incubation of smallpox has entirely lost its meaning. A Hindoo in Bombay may be the cause of infection in a Methodist in Wigan by little more reason than a Comet's flight. The complacency about the need for vaccination may be due to a dependence upon medical research to produce the appropriate antibiotic before a severe outbreak of smallpox causes wide-spread fatalities and panic. Such complacency and dependence entails a grave risk and is a stable-door policy. These statements are not to be taken as a hell-fire doctrine whereby our omissions will bring forth everlasting damnation—rather are they meant to infer that in the present stage of medicine in the control of smallpox the disregarding of the immunity conferred by vaccination is not justifiable. It is no answer to say that a dread of the portentous will breed a nation of melancholics and neurotics; the vaccination of an infant will cause no more neurosis than will its Christening.

Tuberculosis has been referred to as "a social problem with a medical aspect." The control of tuberculosis depends greatly upon improved living conditions of the population, outstandingly so with regard to good housing and to good nutrition. The re-housing of many classes of the population has been an urgent necessity for many years and the Points System was a measure of remarkable value especially in the conditions of wartime and in the immediate post-war period. It was a scheme with much to commend it to achieve equity and fairness in the allocation of houses, but, unfortunately, disease is still one of the great imponderables which refuses to conform to the modern passion for administrative tidiness. Tuberculosis is not held in check till the tedious and slow-working mechanism of the Points System brings an application from Z to A in its table; far from being checked it runs rampant whilst the arithmetical progression in the Points System takes its course.

It is to be emphasized that tuberculosis, at present, is to be controlled by social measures as well as by direct medical treatment. Sanatoria treatment alone is neither sufficient nor yet desirable and in selected cases re-housing is imperative if incapacities, miseries and deaths are to be avoided. "An Apple, cleft in two, is not more twin" than good housing conditions and the control of tuberculosis. It is encouraging to record that one selected case of tuberculosis in which the importance for re-housing was vital and imperative, and which was supported to rock-bottom by competent medical opinion, was re-housed without the limitations of a Points System being strictly applied.

In an area enriched in interest by evidences of Roman occupation and civilisation it seems incongruous to record that South Croxton, Ulverscroft and Barby Thorpe are still without a piped water supply. Be not too swift to chide—as the year ended the pipes were laid at South Croxton and soon the water may flow.

Some progress has been made in sewage disposal in that at Burton-on-the-Wolds a pumping station has been installed and the village sewage is now disposed of at the ex-R.A.F. Station works of the Air Ministry. New sludge beds are installed at Thurmaston and Wymeswold and at Barkby the sewage works has been eliminated by the sewage being connected directly with the Syston sewer. At Birstall the obsolete sewage works continues to be further overloaded and the proposed scheme to dispose the sewage into the Queniborough works still awaits commencement. "Let there be no long tarrying".

The sewage farm at Mountsorrel has given rise to much investigation as its efficiency is affected by the effluent from a factory manufacturing leather board. The effluent is receiving the attention of engineers and scientists and its satisfactory control is to be expected. Acknowledgment is to be made to the painstaking and valuable work of the scientist as it is in the field of chemistry where the solving of the problem lies.

Refuse collection is an important item to the ratepayers. From the Public Health point of view it is disappointing to record that the Sileby tipping site is not yet in use. The site was selected after full consideration had been given to every potential tipping site in the area, but it would seem there is a difficulty to every solution wherever tipping is concerned. A well controlled and organized tipping system at Sileby would seem to have many advantages over the several scattered dumping areas at Quorn, Queniborough and Thurmaston.

Being a rural area many brooks course their way through the villages. It is true that in many cases they are overgrown with vegetation but an equal feature is the amount of tin lids, pram wheels and tinkers' junk that litters their course through the villages. As deplorable as the state of the brooks would appear to be the actual danger to health is more of conjecture than fact.

"Lilies, when they fester, smell far worse than weeds."

The brooks may require cleaning but not for the reason as constituting a danger to Public Health great enough for legal action to be successful. This is not to be confused with the deleterious effects due to flooding, but this is seldom the reason for complaints brought against the state of the brooks.

The repair of old properties has been maintained and it may not be far distant when consideration may be given to the demolition of much old and unfit property. A good standard of housing throughout the area will then have been achieved.

It is wise to be sceptical with regard to the ideas of statisticians about trends in population, but unless the prediction of a great increase in the numbers of old people is ludicrously false, this is a problem that will require wide consideration. Everyone runs away from senility as if it were a notifiable disease, though it is to be admitted that the care and nursing of the aged requires even more than infinite patience. It requires, too, a complete understanding of the medical factors involved. It takes but little foresight to see the necessity soon for clinics for the ageing and chronic sick comparable to the Welfare Clinics for the very young. In these clinics geriatrics will be put to practical effect. As a rule old people do not take lightly to the acknowledgment of their infirmities and it will need a master both of psychological medicine and of English to put a name, attractive by its euphemism, to the clinics. But far greater foresight in the care of old age is required than the provision of clinics. "Perhaps age is only beautiful when thought and activity have moulded the character" and this can only be achieved by confronting the problem early in life and in all its stages. "To know how to grow old is the master work of wisdom", and as wisdom is something more than knowledge, the problem is not easy of solution. Unless the problem is solved comprehensively it may well be asked what is the advantage of progress in gerontology if we are but to go on living mentally in life's back slums?

The subject is not even touched upon, but the aim should be for the aged to be able to say, as in the words of Housman,

“My pleasures are plenty, my troubles are few”.

I am very grateful to the Council for the encouraging interest shown in the work of the Public Health Department.

I wish to express my sincere appreciation to the Senior Sanitary Inspector, Mr. W. Donovan, and to all the members of the Department for their great initiative and painstaking work. I am also very grateful to Dr. R. Cautley Holderness, Medical Officer of Health, Loughborough, who so kindly undertook the essential medical duties of the Department whilst I was under the care of Surgeons and Physicians.

GENERAL STATISTICS

Area—54,804 acres

Resident population	...	...	...	...	...	48,940
Number of houses inhabited at the end of 1952	...	...	...	...	...	14,218
Rateable value	...	...	...	...	...	£243,391
Sum represented by Penny Rate...	...	...	...	...	...	£910 14 5

VITAL STATISTICS

Population—Census 1931	...	...	...	...	...	30,862
Population—National Registration 1939	...	...	...	...	...	41,599
Population—Census 1951	...	...	...	...	...	47,376
Population (Estimated from Birth and Death Rates 1952)	...	...	...	...	...	48,940

BIRTHS

LIVE BIRTHS

	Male	Female	Total	1951
Legitimate ...	322	311	633	701
Illegitimate...	13	10	23	25
	<u>335</u>	<u>321</u>	<u>656</u>	<u>726</u>

			1952	1951
Birth rate per 1,000 population ...	...	...	13.4	15.2
England and Wales	...	...	15.3	15.5

STILL BIRTHS

	Male	Female	Total	1951
Legitimate ...	7	6	13	12
Illegitimate...	—	—	—	—
	<u>7</u>	<u>6</u>	<u>13</u>	<u>12</u>

			1952	1951
Rate per 1,000 population	...	...	0.27	0.25
England and Wales	...	...	0.35	0.36

DEATHS

	Male	Female	Total	1951
All causes and ages	228	232	460	525
			1952	1951
Rate per 1,000 population	...	...	9.4	11.0
England and Wales	...	...	11.3	12.5

INFANT MORTALITY

DEATHS OF INFANTS UNDER ONE YEAR OF AGE

	Male	Female	Total	1951
Legitimate	8	4	12	12
Illegitimate... ..	—	—	—	1
	8	4	12	13

Deaths of Infants under one year of age			1952	1951
Legitimate per 1,000 legitimate live births			19.0	17.1
Illegitimate per 1,000 illegitimate live births			—	40.0
Total deaths per 1,000 live births			19.3	17.9
England and Wales			27.6	29.6

DEATHS OF INFANTS UNDER FOUR WEEKS OF AGE

	Male	Female	Total	1951
Legitimate	7	2	9	5
Illegitimate... ..	—	—	—	1
	7	2	9	6

Deaths of Infants under four weeks of age			1952	1951
Legitimate per 1,000 legitimate live births			14.22	t7.13
Illegitimate per 1,000 illegitimate live births			—	40.00
Total deaths per 1,000 live births			14.72	8.26

DEATHS FROM ALL CAUSES

	Male	Female	Total	1951
1. Tuberculosis, respiratory	6	3	9	10
2. Other forms of tuberculosis	2	—	2	2
3. Syphilitic disease	—	1	1	2
4. Diphtheria	—	—	—	—
5. Whooping Cough	—	—	—	1
6. Meningococcal Infections	1	—	1	1
7. Poliomyelitis	—	—	—	—
8. Measles	—	—	—	—
9. Other infective and parasitic diseases	—	1	1	—
10. Malignant neoplasm stomach	7	5	12	12
11. Malignant neoplasm lung	11	3	14	11
12. Malignant neoplasm breast	—	10	10	12
13. Malignant neoplasm uterus	—	3	3	1
14. Other malignant and lymphatic neoplasms	29	25	54	46
15. Leukæmia, aleukæmia	—	—	—	4
16. Diabetes	3	2	5	3
17. Vascular lesions of nervous system	23	42	65	71
18. Coronary disease, angina	32	17	49	60
19. Hypertension with heart disease	12	6	18	37
20. Other heart diseases	28	46	74	94
21. Other circulatory diseases	13	10	23	31
22. Influenza	3	4	7	18
23. Pneumonia	4	2	6	17
24. Bronchitis	11	9	20	21
25. Other respiratory diseases	2	4	6	2
26. Ulcer of stomach and duodenum	4	—	4	7
27. Gastritis, enteritis and diarrhœa	—	—	—	3
28. Nephritis and nephrosis	3	4	7	1
29. Hyperplasia of prostate	2	—	2	5
30. Pregnancy, childbirth, abortion	—	—	—	—
31. Congenital malformations	1	4	5	5
32. Other defined and ill-defined diseases	23	23	46	37
33. Motor Vehicle accidents	2	2	4	3
34. All other accidents	5	5	10	5
35. Suicide	1	1	2	3
36. Homicide and operations of war	—	—	—	—

PREVALENCE OF INFECTIOUS DISEASE

GENERAL

The total number of each disease notified was as follows:—

Cerebro-spinal meningitis	...	...	...	...	...	...	...	...	...	3
Diphtheria	...	...	...	...	...	...	...	...	...	—
Dysentery	...	...	...	...	...	...	...	...	...	3
Erysipelas	...	...	...	...	...	...	...	...	...	7
Food Poisoning	...	...	...	...	...	...	...	...	...	—
Measles	...	...	...	...	...	...	...	...	...	252
Pneumonia...	...	...	...	...	...	...	...	...	...	42
Poliomyelitis (Acute) (Infantile Paralysis)	...	...	...	...	...	...	...	...	...	3
Puerperal Pyrexia	...	...	...	...	...	...	...	...	...	3
Scarlet Fever	...	...	...	...	...	...	...	...	...	75
Tuberculosis	...	...	...	...	...	...	...	...	...	66
Typhoid Fever	...	...	...	...	...	...	...	...	...	—
Whooping Cough...	...	...	...	...	...	...	...	...	...	145

The following table classifies these notifications (excluding tuberculosis) according to age groups:—

TOTAL CASES NOTIFIED													
Age Periods													
Disease	0-	1-	3-	5-	10-	15-	25-	45-	65-	Age un- known	Total Deaths		
Scarlet Fever	—	5	16	38	9	1	4	—	—	2	75	—
Whooping Cough	8	39	51	44	1	1	1	—	—	—	145	—
Measles	4	61	55	125	6	—	—	—	—	1	252	—
Poliomyelitis	—	—	1	1	—	1	—	—	—	—	3	—
Pneumonia	—	—	5	5	—	9	—	11	10	2	42	6
Dysentery	—	—	—	2	—	—	—	—	1	—	3	—
Erysipelas	—	—	—	—	—	1	—	3	2	1	7	—
Cerebro-spinal meningitis	—	—	1	1	—	—	—	1	—	—	3	1

IMMUNISATION

The following table gives the number of children who were immunised during the period 1st January—31st December, 1952:—

Age at 31.12.52	Under 1	1	2	3	4	5	6	7	8	9	10	11	12	13	14
i.e. born in year	1952	1951	1950	1949	1948	1947	1946	1945	1944	1943	1942	1941	1940	1939	1938
Primary Immunisation	56	440	53	13	8	19	7	1	—	—	1	1	—	1	—
Booster Dose	—	—	—	—	41	335	97	20	8	7	5	3	1	1	—

TUBERCULOSIS

During the year 1952 the following cases and deaths from Tuberculosis were notified:—

Age Periods				NEW CASES				DEATHS			
				Respiratory		Non-respiratory		Respiratory		Non-respiratory	
				M	F	M	F	M	F	M	F
0-	...	...	...	—	—	—	—	—	—	—	—
1-	...	...	...	—	—	1	1	—	—	—	—
5-	...	...	...	1	1	—	—	—	—	—	—
10-	...	...	...	2	4	—	1	—	—	—	—
15-	...	...	...	7	12	1	1	—	—	—	—
25-	...	...	...	4	5	1	—	1	—	—	—
35-	...	...	...	7	—	1	—	2	1	—	—
45-	...	...	...	8	3	—	—	4	—	—	—
55-	...	...	...	3	—	—	—	2	—	—	—
65-	...	...	...	1	1	—	—	—	1	—	—
Age unknown	...	...	...	—	—	—	—	—	—	—	—
				33	26	4	3	9	2	—	—
				—	—	—	—	—	—	—	—

SANITARY CONDITIONS OF THE AREA

WATER SUPPLY

The improvement since last year is that the water pipes are now laid at South Croxton but the villages of Ulverscroft and Barkby Thorpe await tap water as the world awaits flights to the moon.

There are 13,715 houses in the district with a main water supply within the curtilage of the houses and 514 houses are supplied from wells and springs.

The main supply in the district is from the Leicester source of supply while Loughborough Corporation supplies a few houses.

WATER SAMPLES

		Number of samples taken	Satisfactory	Unsatisfactory
Piped water	...	—	—	—
Well and spring water	...	33	7	26

DRAINAGE AND SEWERAGE

Conditions continue to show slow improvement though many Schools have very poor sanitation. Queniborough School is still without a water carriage system though plans have been approved for the installation.

PAIL CLOSETS

There are 1,463 pail closets in the district which is 101 fewer than last year.

The detailed information for each parish is as follows:—

Parish	No. of Properties with a main water supply	No. of Properties without a main water supply	No. of pails in each Parish
ANSTEY	1,127	10	100
BARKBY	102	18	49
BARKBY THORPE	—	17	10
BARROW-UPON-SOAR	816	13	74
BEEBY	25	2	13
BIRSTALL	2,123	—	—
BURTON-ON-THE-WOLDS	224	12	21
COSSINGTON	108	8	41
COTES	8	4	7
CROXTON, SOUTH	—	53	40
HOTON	58	11	34
MOUNTSORREL	1,145	10	118
NEWTOWN LINFORD	268	16	5
PRESTWOLD... ..	14	4	11
QUENIBOROUGH	339	14	101
QUORNDON	945	15	34
RATCLIFFE-ON-THE-WREAKE	39	13	19
REARSBY	183	17	73
ROTHLEY	876	10	76
SEAGRAVE	77	23	85
SILEBY	1,265	15	112
SWITHLAND... ..	38	10	21
SYSTON	1,576	20	100
THRUSSINGTON	113	31	74
THURCASTON	360	12	24
THURMASTON	1,119	16	20
ULVERSCROFT	—	47	14
WALTON-ON-THE-WOLDS	66	16	38
WANLIP	27	3	14
WOODHOUSE	490	32	25
WYMESWOLD	184	42	110
	<u>13,715</u>	<u>514</u>	<u>1,463</u>

HOUSING

The following table gives the figures for houses completed and in the course of erection for the year:—

	Completed	Uncompleted
Prefabricated	6	—
Permanent	116	228
Private Enterprise... ..	55	98
	<u>177</u>	<u>326</u>

There were 1,212 applications for Council houses at the end of the year and, of these, 431 were made during 1952.

LABORATORY, HOSPITAL, AMBULANCE AND NURSING FACILITIES

Close co-operation has been maintained in these matters with the County Medical Services with complete success.

When the voluntary services of the N.S.P.C.C. have been requested there was always a very willing and valuable response in several cases where the safety and welfare of children were in hazard.

LABORATORY SPECIMENS

Nature of Specimen									Number Examined
Throat and Nose Swabs	...	...	...	...	...	...	...	...	2
Faeces and urine	...	...	...	...	...	...	...	...	6
Blood	...	...	...	...	...	...	...	...	7
Sputa	...	...	...	...	...	...	...	...	89
Milk	...	...	...	...	...	...	...	...	9
Water	...	...	...	...	...	...	...	...	6
Miscellaneous	...	...	...	...	...	...	...	...	65
									184

REPORT OF THE SENIOR SANITARY INSPECTOR

SANITARY INSPECTION OF THE DISTRICT

The work of the Sanitary Inspectors is summed up in the appended list showing the nature and number of visits made during the year.

The duties are varied, from the inspection of dwelling-houses and factories to the sampling of ice cream. The concern is that people shall live and work under healthy conditions and that the food they eat shall be prepared in hygienic circumstances and be pure and clean. Slow though progress may seem it is perceptible over a period.

INSPECTIONS MADE									Number of Inspections
Animal Keeping	...	...	...	...	...	...	...	...	55
Bakehouses	...	...	...	...	...	...	...	...	10
Dairies	...	...	...	...	...	...	...	...	134
Drainage Works	...	...	...	...	...	...	...	...	1,767
Dwelling-houses (all purposes)	...	...	...	...	...	...	...	...	1,937
Food Premises	...	...	...	...	...	...	...	...	459
Offensive Trades	...	...	...	...	...	...	...	...	54
Refuse Collection and Disposal...	...	...	...	...	...	...	...	...	25
Rodent Control	...	...	...	...	...	...	...	...	121
Schools	...	...	...	...	...	...	...	...	11
Shops	...	...	...	...	...	...	...	...	232
Slaughter-houses and Meat Inspection...	...	...	...	...	...	...	...	...	32
Smoke Observations	...	...	...	...	...	...	...	...	9
Tents, Vans, Sheds, etc.	...	...	...	...	...	...	...	...	418
Verminous and Dirty Premises	...	...	...	...	...	...	...	...	12
Water Supplies	...	...	...	...	...	...	...	...	558
Workshops, Outworkers, etc.	...	...	...	...	...	...	...	...	113
Other Inspections	...	...	...	...	...	...	...	...	493
									6,440

NOTICES

PRELIMINARY

					Housing	Public Health Nuisances, etc.
Outstanding on 1st January	...	...	...	...	62	13
Issued during year	...	...	...	...	261	48
Complied with during year	...	...	...	...	219	50
Statutory action necessary	...	...	...	...	65	—
Outstanding 31st December	...	...	...	...	45	11

STATUTORY

Outstanding on 1st January	...	...	...	...	62	1
Issued during year	...	...	...	...	65	—
Complied with during year	...	...	...	...	59	—
Outstanding 31st December	...	...	...	...	65	—

SUMMARY ACTION

It was not found necessary to summon any person for non-compliance with Statutory Notices.

INSPECTION OF DWELLING-HOUSES

The work of arresting the further deterioration of houses still seems to be the only policy worth pursuing. In spite of difficulty much remedial work was carried out with or without the Service of Notices.

Although costs are high it behoves the landlord to remember that for the want of a slate the house may be lost. We find, however, in our visits that the landlord is not always wrong and the tenant is not always right.

In addition to repairing properties, in 92 houses water closets were substituted for pail closets and in one case a privy was converted to a water closet. Although the cost of conversions is high, nevertheless the landlord is not at a loss as these improvements permit a fair percentage profit on the outlay.

Demolition Orders were made on 2 houses only. The demolition of 10 houses was carried out by the owners where Demolition Orders were outstanding.

(1) Total number of houses inspected for housing defects	...	...	...	943
Number of Inspections made	...	...	...	1,937
(2) Number of houses inspected under the Housing Consolidated Regulations	...	...	...	55
Number of Inspections made	...	...	...	55
(3) Number of houses found to be unfit for habitation	...	...	...	22
(4) Number of houses requiring repair	...	...	...	322
(5) Number of defective houses rendered fit in consequence of informal action by Local Authority	...	...	...	219
(6) Number of houses rendered fit after service of formal notices under Housing Act:				
(a) by owners	...	...	...	—
(b) by Local Authority in default of owners	...	...	...	—
(7) Number of houses in respect of which notices were served under Public Health Acts requiring remedying or repair	...	...	...	65
(8) Number of houses in which defects were remedied under Public Health Acts:				
(a) by owners	...	...	...	59
(b) by Local Authority in default of owners	...	...	...	2
Number of Demolition Orders made	...	...	...	2
Number of houses Demolished	...	...	...	10
Number of Closing Orders on parts of houses	...	...	...	—

OVERCROWDING

There were no new cases of Statutory Overcrowding found.

VERMINOUS PROPERTIES

The use of modern insecticide has almost totally eradicated vermin from premises. No cases of bug infestations were found and only 4 houses were treated for minor infestations of fleas.

There are still many houses however, which, although not coming into the category of "verminous and filthy", would be greatly improved by the old-fashioned remedy of soap and water applied frequently.

CAMPING SITES

There were 29 sites licensed for the stationing of caravans and the number of caravans totalled 130. Many others came and departed within the "Statutory free" period.

On the whole the camping sites are conducted in a satisfactory manner but the odd case of nuisance on the site gives the majority a bad name.

The caravans are generally occupied throughout the year as the people have no other homes. While these conditions may be adequate for young couples, they are far from satisfactory for the housing of children and old people.

INSPECTION AND SUPERVISION OF FOOD

MILK SUPPLY

There were 14 premises registered as dairies (other than dairy farms). The method of distributing milk is good and only very small quantities are now served from the can.

Most of the milk sold is now either pasteurised or sterilised which is a safeguard as well as a commercial advantage.

There are two pasteurising plants and one for sterilising milk licensed by the County Council and reports on their efficient methods of pasteurising and sterilising milk have been received.

Samples of milk have been taken for the methylene blue tests and the reports on unsatisfactory samples sent to the County Milk Regulations Officer for further investigations on the farms.

All raw milk sold in the district is sampled twice a year for investigation into the presence of myco-tuberculosis and brucella abortus. Samples from 4 farms were found to be tuberculous and the sale of raw milk stopped until the infected cows had been removed from the herds.

MILK SAMPLES

				Samples taken for bacteriological examination (Methylene Blue, Cleanliness Test)	Satisfactory	Unsatisfactory
Class						
Ordinary Milk	...	...	...	72	61	11
Tuberculin Tested	...	...	...	8	8	—
Accredited	...	...	...	14	13	1
Samples taken for biological (T.B.) examination					Satisfactory	Unsatisfactory
110					106	4

MILK SPECIAL DESIGNATIONS REGULATIONS, 1949

	Pasteurised	Sterilised	T.T.
Dealer's Licences issued	6	8	4
Supplementary Licences issued	3	2	3

ICE CREAM

The bulk of ice cream consumed in the district is “imported” being manufactured by the large firms, there being only 3 small manufacturers in the district. These 3 firms use the cold-mix method of manufacture.

There are 91 premises registered for the retail of ice cream. In 3 cases registration of premises was refused on the grounds of unsuitability.

The quality of the ice cream has shown a great improvement and most of the ice cream is now wrapped. Is there any reaction on the part of the public, especially children, to wrapped ice cream? The sale of iced lollipops, an article easier to handle than a wrapped ice cream block, is on the increase.

Number of samples taken	...	...	...	...	...	...	...	52
Grade 1 (Highest Grade)	...	...	...	...	...	...	...	44
Grade 2	...	...	...	...	...	...	...	5
Grade 3	...	...	...	...	...	...	...	3
Grade 4	...	...	...	...	...	...	...	—
Iced Lollipops:—								
Satisfactory	...	...	...	...	...	...	...	9
Unsatisfactory	...	...	...	...	...	...	...	—

MEAT AND OTHER FOOD INSPECTION

There are no regional Slaughterhouses in the area but 21 slaughterhouses are licensed. On these premises pigs are killed for human consumption but as they are **not for sale** we have no powers of seizure of unfit carcasses. The owners of diseased animals are advised not to eat the flesh. Three pigs were condemned and destroyed on the advice of the Sanitary Inspector.

The following articles of food were condemned as being unfit for human consumption:—

Bacon	...	...	...	...	...	...	...	1 st. 7 lb.
Cheese	...	...	...	...	...	...	...	1 st. 9 lb.
Jellied Veal (tinned)...	...	...	...	...	...	...	...	1 st. 12 lb.
Meat (tinned)	...	...	...	...	...	...	...	4 st. 6 lb.
Peas	...	...	...	...	...	...	...	14 tins
Prunes	...	...	...	...	...	...	...	1 tin
Sausage	...	...	...	...	...	...	...	3 st. 10 lb.
Beans	...	...	...	...	...	...	...	2 tins
Fruit	...	...	...	...	...	...	...	29 jars 124 tins
Jams	...	...	...	...	...	...	...	7 tins
Milk	...	...	...	...	...	...	...	10 tins
Fish	...	...	...	...	...	...	...	21 tins
Soup	...	...	...	...	...	...	...	3 tins
Tomatoes	...	...	...	...	...	...	...	172 tins
Cereals	...	...	...	...	...	...	...	5 packets
Biscuits	...	...	...	...	...	...	...	39 packets
Stewed Steak	...	...	...	...	...	...	...	6 lb.
Loose meat	...	...	...	...	...	...	...	21 lb.
Ham	...	...	...	...	...	...	...	125 lb.
Mushrooms	...	...	...	...	...	...	...	1 tin
Baked Beans	...	...	...	...	...	...	...	8 tins
Apples	...	...	...	...	...	...	...	145 tins
Miscellaneous items...	...	...	...	...	...	...	...	5

FOOD PREMISES

There has been a perceptible improvement in the conditions of food premises generally. On the whole shopkeepers are willing to do what is required of them but in some of the village stores where a multitude of goods are sold, space is very restricted and a great deal of ingenuity is required to keep the shop clear of trade rubbish. It is usual to rely on the kitchen sink for hand washing and this arrangement is satisfactory providing the shopkeeper or assistant has a hygiene consciousness.

RODENT CONTROL

The work of killing rats and mice is a task that is never ending. It is virtually impossible to kill the last rat in the district but we can be greatly helped by information from people who see rats giving early notification.

Although the Council give a free destruction service to private householders, nevertheless, occupiers of houses and land are themselves legally responsible for reporting the presence of rats and the ratproofing of premises.

A moderate charge is made for the treatment of business premises.

A whole-time ratcatcher works under the supervision of the Sanitary Inspector.

During the year 280 private dwellings and 13 business premises were found to be infested with rats and treated. In addition the two refuse tips, the sewage farms and the Council sewers also had regular treatment.

OTHER REGULATED BUILDINGS

KNACKERS YARDS

There are two Knackers Yards registered and no contraventions were noted.

PET SHOPS

The Pet Animals Act, 1951, came into operation on the 1st April, 1952.

Two premises are licensed for the sale of animals as pets and the conditions have been found satisfactory.

Conditions are attached to the licences to safeguard the health and comfort of the animals. The assistance of the R.S.P.C.A. in drawing up the conditions has been appreciated.

RAG FLOCK

One factory is registered for the upholstering and filling of bedding, etc., with rag flock and other filling materials.

The premises are satisfactory.

CANAL BOATS

Although Canal Boats ply through the district, none are registered by this Authority.

FACTORIES

Certain provisions only of the Factories Act, 1937, are carried out by the Local Authority. The duties of public health officers comprise:—

- (a) In all factories the enforcement of the provisions as to sanitary conveniences (sufficiency, cleanliness, lighting) and fire escapes.
- (b) In factories where mechanical power is not used, in addition to the preceding provisions (a) cleanliness of the factory, overcrowding, temperature, ventilation and drainage of floors.

FACTORIES ACT, 1937

Number of factories on Register	...	...	...	...	...	...	243
Number of Inspections	...	...	...	...	...	...	113
Number of written notices	...	...	...	...	...	...	6
Number of occupiers prosecuted	...	...	...	...	...	...	—
Number of defects found	...	...	...	...	...	...	18
Number of defects remedied	...	...	...	...	...	...	18
Number referred to H.M. Inspector of Factories	...	...	...	...	...	...	—
Number referred by H.M. Inspector Factories	5

OUTWORKERS

Number employed in the making of wearing apparel	26
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I have the honour to remain your obedient servant,

J. W. HALL,

Medical Officer of Health.

